MICHIGAN DEPARTMENT OF AGRICULTURE FAIRS, EXHIBITIONS & RACING P.O. BOX 30017, LANSING, MI 48909

FR-41 (Rev.3/02

FOAL APPLICATION

THOROUGHBRED

According to the provisions of Act No.327, P.A. 1980 as amended, and Michigan Department of Agriculture Regulation No. 810, Rule 2 (4) "A certificate of eligibility shall be issued by the director for a Michigan-bred horse that meets all of the requirements set forth in subrules (1) to (3) of this rule."

Name of Foal	Jockey Club Certificate No Date for		Date foal	ed	Name of Mare	
Bred by: (if joint tenant specify)		Social Security or Federal I.D.		No	4	
Bred by. (If Joint tenant specify)		Social Security of Federal I.D. No		. 110	Name of Challion	
					Name of Stallion	
		nd Breeder, Social Securit	y or Federal I.D. l	No.	-	
	,	_			Certificate No	
					<u>Certificate 140</u>	
		3 rd Breeder, Social Security or Federal I D No.		О.	_	
Breeder Phone No						
					Date certificate issued	
Address (present address)				1		
· ·						
City	State			Zip Code		
State				Zip Code		
Folded in (state) Stallion to		that dam was bred to after foaling		Standing at (farm, city & state)		
Present owner				Social Security No.		
resent owner				Social Security 110.		
Address (no. & street or road)				Phone No.		
(/					
		Τ			T =	
City		State			Zip Code	
Signature of breeder(s) or au	thorized agen	nt				

ATTACH A COPY OF THE JOCKEY CLUB CERTIFICATE PAPERS